

PRIVATE AND CONFIDENTIAL

Professor Dr Alan Walsh
HM Area Coroner, Manchester West
HM Coroner Court, Paderborn House
Howell Croft North
Bolton
BL1 1QY

20 December 2023

Dear Mr Walsh

Re: Shaun Houghton (deceased)

I write further to your correspondence dated 25 September 2023. I am grateful to you for bringing these matters of concern to my attention. On behalf of Greater Manchester Mental Health NHS Foundation Trust (GMMH) I would like to offer Shaun's family our sincere condolences for their loss.

Please see the Trust's response in relation to the concerns you have raised, and the actions taken by the Trust below:

1. During the Inquest evidence was heard that:

- I. There are 5 separate units at Atherleigh Park Hospital and the current self-discharge against medical advice procedures or policies are uniform across all 5 units and do not involve a referral to a Consultant or Senior Doctor before the patient leaves the Hospital to check whether the patient should be considered for detention under the Mental health Act 1983.**
- II. There is no check list in relation to self-discharge against medical advice patients for junior Doctors to refer to before the patient leaves the Hospital.**
- III. No medication was prescribed or dispensed to the Deceased at the time of self-discharge.**

- 2. I request that the Greater Manchester Mental Health NHS Foundation Trust reviews the procedures and policies to cover all 5 units at the Atherleigh Park Hospital in relation to self-discharge against medical advice patients, with a review to there being a written policy, including a check list to assist junior Doctors.**

The Trust took the decision to review policies and procedures Trust wide in relation to self-discharge against medical advice. A small cohort of senior clinicians undertook this review. Following this review it was highlighted that there were variations in practice occurring across the Trust.

Once the review was completed, it was agreed that a single Trust wide Standard Operating Procedure (SOP) would be written and implemented to ensure that all areas of the Trust follow a standardised, good practice process (which includes a checklist) in relation to self-discharge against medical advice.

- 3. I further request that the Trust reviews the procedures and policies in relation to a referral to a Consultant or Senior Doctor before a self-discharge against medical advice patient leaves the Hospital to check whether the patient should be considered for detention under the Mental Health Act 1983.**

The SOP makes clear that where a patient requests self-discharge against medical advice, a Consultant or Senior Doctor must be contacted for guidance. The Consultant or Senior Doctor is expected to be involved in conversations with junior doctors about any patient who requests their discharge against medical advice.

A mental state examination including both a capacity assessment and risk assessment will be undertaken. This will inform the most appropriate actions including consideration of whether a person is detainable under the Mental Health Act 1983, the use of the Mental Capacity Act or the Deprivation of Liberty Safeguard Policy

Within the new SOP, patients requesting their discharge against medical advice will have their mental capacity reviewed, initially utilising the two-stage test set out in the Mental Capacity Act 2005. Where the answer to both stages is yes, capacity will be further checked utilising the guidance in the Trust Mental Capacity Act and Deprivation of Liberty Safeguard Policy, and the outcome of this must be recorded on the Trust 'Self Discharge of an Adult' form.

- 4. I further request that the Trust reviews the procedures and policies in relation to the prescription and dispensing of medication before a self-discharge against medical advice patient leaves the Hospital**

The SOP is clear that prescribed discharge medications must be supplied before a patient leaves the inpatient setting. The prescribing of medications will form part of the risk assessment process. This is also included in the checklist for ward staff that is to be completed when a self-discharge proceeds and is recorded in the patients care record. Section 4.1 of the Trust Medication Management Policy sets out the general principles to be followed for the supply of medications throughout the Trust. Section 4.2.2 outlines the principles for the supply of discharge prescriptions and medications which includes that medications must be received before a patient is discharged.

The SOP will be submitted for ratification in January 2024 to the oversight committee and once approved, will be issued to all Care Groups to be disseminated to staff. This is expected to be

Greater Manchester Mental Health NHS Foundation Trust, Trust Headquarters,
Bury New Road, Prestwich, Manchester M25 3BL.

completed by February 2024. The SOP will be available to all staff on the Trust intranet and will be shared with junior doctors as part of their induction. The learning from this inquest and the new SOP will be shared in the Trust's monthly Patient Safety Newsletter which is received by all staff.

The SOP can be shared once ratified if required.

[REDACTED], on behalf of the Trust can I thank you again for bringing these matters of concern to the Trust's attention. I hope this response assures you of the Trust's ongoing willingness to ensure the highest standards of patient care and I am grateful to you for your contribution to that endeavour. If you have any further questions in relation to the Trust's response, please do let me know.

Yours Sincerely,

[REDACTED]

[REDACTED]
Chief Medical Officer

[REDACTED]

[REDACTED]